

# Work Order ID 51498

August 25, 2009 1:33:37 PM



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Item ID: D205-634-011

Accept



Setup Start



Revision ID: F

Item Name: Skidtube

Stop



Start Date: 8/24/09 Start Qty: 1.00



Cust Item ID:

Required Date: 8/24/09 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan: *BS*

Date: *09-8-25*

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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IIN D205-634	Rev F
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100

0.00



DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPP D205-634-011  
CHG 007

*HJ for CL 09/11/10*

110

Pick Kit

0.00



Packaging

Memo

0.00

Packaging

*9/11/10 SP*

120

QC4- 100% Inspect kits for completeness

0.00



QC

Memo

0.00

Quality Control

*SP 09/11/10 (1)*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

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Item ID: D205-634-011

Accept



Setup Start



Revision ID: F

Stop



Item Name: Skidtube

Start Date: 8/24/09 Start Qty: 1.00



Cust Item ID:

Required Date: 8/24/09 Req'd Qty: 1.00



Customer:

Reference:

Run Start



Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Stop



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
	Packaging								
	Packaging								
	Memo	0.00							
	Identify and pack for shipping as per PPP D205-634-011								
	Location: <u>75</u>								
	PPP rev: <u>A</u>								
140	QC21- Final Inspection - Work Order Release	0.00							
	QC								
	Quality Control								
	Memo	0.00							

09/14/10

09/11/10

MF 09-11-10

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 51498

Parent Item: D205-634-011RevF

Parent Item Name: Skidtube


Comments:

Start Date: 8/24/09

Required Date: 8/24/09

Start Qty: 1.00

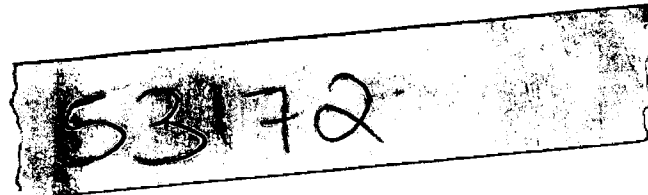
Required Qty: 1.00

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Remaining Qty To Pick	Qty Issued	Date Issued	Status
D205-634-041RevD		Manufactured	No			110	Each	7.0000	1.0000			
												
Replacement Skidtube												

53172

SP

88



Warehouse	Loc Qty	Loc Code
Location		
Main Warehouse		
FG	7	
23589	0	
23844	0	
47598	1	
47599	1	
47666	1	
47667	1	
50843	1	
50844	1	
50846	1	


X  
B

K10003RevF

Manufactured No



Saddle, D205-634-011

110 Each 7.0000 1.0000



51658

9/11/10

SP

Warehouse	Loc Qty	Loc Code
Location		
Main Warehouse		
FG	7	
50750	3	
50751	4	


W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries